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medicine. A graduate of the Sheffield Scientific School and of the College of Physicians and Surgeons, he emphasized the importance of chemistry and physics, the two sciences on which he based his clinical conceptions. Coming early under the mature and wise influence of his distinguished father, he received from him the more pure clinical and pathological impress which so much contributed to his broader development. In rapid succession Dr. Janeway became instructor in medicine at New York University and Bellevue Hospital Medical College in 1898, and Bard professor of medicine at Columbia University in 1909. During this period, in 1907, he was instrumental in founding the Russell Sage Institute of Pathology, which throughout its connection with the City Hospital was made a valuable adjunct to the courses in medicine which he conducted. It was natural and logical, because of the work he had done in internal medicine, that Dr. Janeway should be called to fill the full-time chair in internal medicine at the Johns Hopkins Medical School in 1914. The acceptance of the new professorship was made at a large financial sacrifice, but his altruistic action was wholly consonant with the broad and sympathetic attitude which he always held toward medical teaching and research.

Dr. Janeway's untimely death cut short not only a career in medicine which he had inaugurated with every promise of distinguished success, but has at the same time deprived The Rockefeller Institute of one of its ablest and wisest counsellors, and the medical profession of a great physician.

MEDICAL TERMINOLOGY

DR. FRANKLIN MARTIN, member of the advisory commission and chairman of the general medical board of the Council of National Defense, has issued the following statement:

In view of confusion arising because of different terms used in various medical groups to designate the same things it was deemed advisable that a conference be held to discuss the adoption of uniform nomenclature. Accordingly, an informal preliminary conference has been held at the office of the medical section of the Council of National Defense and it is believed that a promising start toward reaching the desired end has been taken.

In a small percentage of instances the same diseases are designated by different words. Similarly, injuries of identical nature, identical operations, procedures such as surgical dressings, diagnostic tests and methods of treatment are, in different branches and in different localities, given different names. The same symbol should be used to designate the same condition. There is also lack of uniformity in abbreviations used in various medical records, such as hospital histories, written orders and laboratory reports.

It is obvious to all medical men that, as a means of a quick understanding and saving of time in these days when time is so precious, the same nomenclature and abbreviations for all identical things should be used. The men who attended the conference were agreed as to the desirability of such entire uniformity.

A net result of the meeting, inasmuch as the Army, Navy and Public Health Service are practically in accord, was the passing of a motion that the Council of National Defense, medical section, should request the Surgeon General of the Army, the Surgeon General of the Navy, and the Surgeon General of the Public Health Service each to name a representative to confer on the matter of agreement concerning names of diseases and injuries. It was also voted that after such a list has been prepared there should be called together representatives of the leading national bodies who should have a voice in such decisions. Once a general agreement is reached the 20,000 doctors who go back to civil life after the war will automatically bring these lists into general use throughout the hospitals of the country.

Those who attended the conference were Colonel Albert G. Love (for sick and wounded records), Colonel Champe C. McColloch, Jr. (for the history of the war), both as representatives of the Army; Assistant Surgeon Charles E. Alexander, statistician for the Bureau of Medicine and Surgery, representing the Navy; Dr. B. S. Warren, statistician for the Public Health Service; Dr. W. H. Davis, of the vital statistics section of the Census Bureau; Dr. W. T. Longcope, as one who could speak for medical colleges; Dr. John W. Trask, who, as a member of the American Medical Association's Committee on nomenclature, could speak for organized medicine, and Dr. Robert L. Dickinson, of the medical section of the Council of National Defense.

LECTURES ON PUBLIC HEALTH

SURGEON-GENERAL GORGAS has arranged for a series of "Half-hour Health Talks" for the